

**490****Forest Site Preparation**

Owner \_\_\_\_\_ Operator I.D. \_\_\_\_\_ Date \_\_\_\_\_  
Operator \_\_\_\_\_ Tract \_\_\_\_\_ Field (s): \_\_\_\_\_  
Contract Number \_\_\_\_\_ Contract Item Number (s): \_\_\_\_\_  
Field Office \_\_\_\_\_

**MANDATORY DOCUMENTATION WITHIN THE PLAN**☐

Practice objective,  
Identification of the extent of practices applied,  
Location identification, this can be an aerial photo, soils map, reference to the conservation plan map, or a sketch in the plan drawings (legal description is required),  
Environmental Evaluation NRCS-WA-CPA-052,  
Documentation of necessary permits – federal, state, tribal, local - as applicable, and  
Site-specific practice specification

The following additional data are needed for the specific practices listed.

Check Use the Check Box to indicate the Requirements are met.

**Box****Requirements****COMMENTS**

<input type="checkbox"/>	Equipment or herbicide needed.	_____
<input type="checkbox"/>	Identify plant competition by species.	_____
<input type="checkbox"/>	Location and extent of access.	_____
<input type="checkbox"/>	Maintenance plan and erosion control needs.	_____
<input type="checkbox"/>	Soils and limitations.	_____
<input type="checkbox"/>	WIN-PST run.	_____

Additional practices [supporting practices] may be necessary to implement, install, operate or maintain this practice. Check the requirements of this practice standard and provide the Practice Documentation Checklist for the necessary supporting practices.

**Certification:**

I have completed a review of all of the practice documentation and certify the applied practice meets NRCS specifications."

Certified by: /s/ \_\_\_\_\_ Date: \_\_\_\_\_

Job Title: \_\_\_\_\_